		FEE CA	ALCUL	ENDEN ATION S FORM P	SHEET		SERIAL O. 14, 628 FILING DATE APPLICANTIS)								
			ACTER				CLA	IMS			1.	T			
	AS FILED		AFTER 1st AMENDMENT				<u>r</u>		*			*			
(D)	IND.	DEP.	IND.	DEP.	IND.	DEP.	+	F.1	IND.	DEP.	IND.	DEP.	IND.	DEP.	
1					<u> </u>	· ·	1	51 52		-				·	
3]	53		1			Ī		
4]	54							
5			ļ			ļ	1	55		ļ		ļ		<u> </u>	
6			ļ			1		56			_[
7			ļ <u>.</u>			-	-	57	ļ		 -	-	ļ	-	
8						 	-	58				<u> </u>			
10			 	-		<u> </u>	1	59		-			 	-	
11						 	1	60		-	+		-		
12			<u> </u>				1	62			+	 			
13							1	63			1				
14]	64							
15	·]	65							
16							1	66							
17			ļ			ļ		67			<u> </u>				
18							-	68		ļ	<u> </u>				
19 20			l			 	ł	69			 				
21							ł	70					 -	-	
22								72			 				
23							ĺ	73			1				
24							İ	74					,		
25								75							
26								76			ļ				
27								77			<u> </u>				
29								78							
30								79 80			 				
31								81							
32								82							
33								83							
34								84							
35 36								85			 				
37				-		 		86							
38								87							
39								89							
40								90							
41								91							
42								92							
43]			93							
44								94							
45								95							
46	-			<u> </u>				96							
48								97						——	
49		-+						99							
50	-+							100						——	
OTAL		, 1				\neg		TOTAL	-						
OTAL		┵┞		⊦ لي		ا لم		TOTAL				ا لي		_	
OTAL								DEP.							
LAIMS	i	1	. [- 1	- 1		TOTAL CLAIMS		i i	1	- 1		- 1	

And the second of the second o